PTO/SB/22 (07-06) Approved for use through 09/30/2006, OMB 0651-0031

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| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) | | | Docket Number (Optional) | | |
|---|---|--------|--------------------------|---------------|--|
| FY 2005 | | | 49409-0050 (315804) | | |
| (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | | | | |
| Application Number 10/534,773 | | | Filed May 13, 2005 | | |
| For Tumour Marker Proteins and Uses Thereof | | | | | |
| Art Unit 1643 | | | Examiner Lynn Anne | Bristol | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. | | | | | |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | | | |
| | | Fee | Small Entity Fee | | |
| | One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ | |
| | Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | |
| \boxtimes | Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ <u>510</u> | |
| | Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | |
| | Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | |
| □ A check in the amount of the fee is enclosed. □ A check in the amount of the fee is enclosed. □ Payment by credit card. □ The Director has already been authorized to charge fees in this application to a Deposit Account. □ The Director is hereby authorized to charge any deficiency fees which may be required, or credit any overpayment, to □ Deposit Account Number 11-0855. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
| l am the | — ··· | | | | |
| | ☐ assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | | |
| □ attorney or agent of record. Registration Number <u>52,130</u> | | | | | |
| attorney or agent under 37 CFR 1.34. | | | | | |
| Registration number if acting under 37 CFR 1.34 | | | | | |
| Ellue Folorih January 29, 2007 | | | | | |
| Signature | | | Date | | |
| Elena S. Polovnikova | | | 404-815-6500 | | |
| Typed or printed name Telephone Number | | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | | | |
| ☐ Total of 1 forms are submitted. | | | | | |

This opinication of information is required by 37 CER 1.138(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 58 U.S. C.132 and 37 CER 1.13 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application from to the USPTO. Time will any depending upon the entirelystic acts Any comments on the amount of these you require to complete this form and/or suggestions for reducing a the control of the control of